

POSITION	ID NO.	DATE
CLASSIFIER	20	10/17
EXAMINER	71531	
TYPIST		
VERIFIER	↓	6-26-98
CORPS CORR.		
SPEC. HAND	704	9-4-98
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	Original
1	5-77
2	5-77
3	5-77
4	5-77
5	5-77
6	5-77
7	5-77
8	5-77
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SYMBOLS

✓	Rejected
*	Allowed
- (Through number)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
51	
52	
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